U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved
Office of Management
and Budget
No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1, File Number U - 7071			2, Fisca	2. Fiscal Year Covered From:				
				1/1/2	2004 Through	r 12 / 31	2004	
3. Name and address of person filing.			4. Nan	4. Name, file number, and address of labor organization.				
Name Joseph	oseph S Stanton		Nam	Name Iron Workers AFL-CIO LU 401				
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P.O. Box, Bldg., Room No., if any			P.O.	P.O. Box, Building and Room Number, if any				
Street 11600 Norco	reet 11600 Norcom Road			Street 11600 Norcom Road				
City Philadelphia			City	Philadelphia	A fine of Access and an analysis of the Access and Acce			
State Pennsylvania		ZIP Code + 4 1915	Stat	Pennsylvania	and the annual state of the sta	ZIP Code + 4	19154	
5. Position in labor organiza	ation. Truste	······································	is in the commencer and in the	annamental latel annamental survivors del Vigoro annamental di Vigoro		national section and the section of		
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Name of Person Filing Joseph Stanton		File Number U-							
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.									
Name and address of Business (including trade name, if any).	9. Business deals with:								
Name	gammonarity								
Trade Name, if any:	a. Labor Organiza	ation							
P.O. Box, Bidg., Room No., if any	b, Trust								
Street	d, Employer								
City			į						
State ZIP Code + 4									
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dea		Acceptable Address of the Address of						
Name Iron Workers Local Union 401	Attendance at App. 6/4/04.	rentice Annual Av	wards Banquet						
Trade Name, if any: Apprentice Training Fund	and the second		in Change work in the						
P.O. Box, Bldg., Room No., if any	2		ver an early proper						
Street 11600 Norcom Road	11.b. Approximate dollar va	lue of such dealing	\$103						
City Philadelphia	12.a. Nature of interest he		transfer his transport or comment of the St. St. Specimen and the st. St. Specimen and the St. St. St. Specimen and the St. St. St. Specimen and the St. Specimen an						
State Pennsylvania ZIP Code + 4 19154									
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	12.b. Amount,		9 th 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
C. Received from any employer (other than an employer covered under parts A and B above)									
or from any labor relations consultant to an employer any payment of money or other thing of value.									
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14,a, Nature of payment.	MANAGERIA I I ROMANNOMO REFEE LANGE EL CONTROL ROMA ANTONO ANT ANTONO EL CEL EL CEL CONTROL ANTONO CONTROL REFEE LA CONTROL CONTROL ROMAN CONTROL CONT							
Name			* Shirt our view for						
Trade Name, if any:	Colonia de la co		** YAYYA HIMIMANAKA						
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Street			der gegyvir mann v. v.						
City			is a Construction of the C						
State ZIP Code + 4			na colada del Paparene						
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		porticised V ^{ert} amore announce 20 AP guaranteen ex a call A [*] C *gar commenteen g						